



### **Application Information**

Application number:: 09/935,390

Filing Date:: 08/22/01

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: SECRETED HUMAN PROTEINS

Attorney Docket Number:: PP-01369.103/200130.428C1

Request for Early Publication?:: No

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

Petition included?::

Petition Type::

Licensed U.S. Gov't Agency::

.Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

#### **First Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Chile

Status:: Full Capacity

Given Name:: Pablo

Middle Name:: D

Family Name:: Garcia

Name Suffix::

City of Residence:: San Francisco

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: PO Box 8097

City of mailing address:: Emeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94662-8097

#### **Second Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Chile

Status:: Full Capacity

Given Name:: Jaime

Middle Name::

Family Name:: Escobedo

Name Suffix::

City of Residence:: Alamo

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: PO Box 8097

City of mailing address::

Emeryville

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94662-8097

**Third Applicant Information** 

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Qianjin

Middle Name::

Family Name::

Hu

Name Suffix::

City of Residence::

**Castro Valley** 

State or Province of Residence::

CA

Country of Residence::

US

Street of mailing address::

PO Box 8097

City of mailing address::

Emeryville

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address::

94662-8097

Fourth Applicant Information

**Applicant Authority Type:**:

Inventor

**Primary Citizenship Country::** 

India

Status::

**Full Capacity** 

Given Name::

**Srinivas** 

Middle Name::

Family Name::

Kothakota

Name Suffix::

City of Residence:: Santa Monica

State or Province of Residence:: CA

Country of Residence::

Street of mailing address:: PO Box 8097

City of mailing address:: Emeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94662-8097

# Fifth Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Lewis

Middle Name::

Family Name:: Williams

Name Suffix::

City of Residence:: Mill Valley

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: PO Box 8097

City of mailing address:: Emeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94662-8097

#### **Correspondence Information**

Correspondence Customer Number ::

Name:: Chiron Corporation

Street of mailing address:: Intellectual Property R338, PO Box 8097

City of mailing address:: Emeryville

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94662-8097

Phone number:: (510) 655-8730

Fax Number: (510) 655-3542

E-Mail address:: corpcomm@chiron.com

### Representative Information

Representative Customer Number::		00500
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## **Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Continuation of	08/988,671	12/11/97
08/988,671	Non-provisional of	60/032,757	12/11/96

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

# **Assignee Information**

Assignee name::	Chiron Corporation
Street of mailing address::	4560 Horton Street
City of mailing address::	Emeryville
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94608-2916

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